

Advocates help close gaps in veteran services

James Goodman, Staff Writer Democrat and Chronicle September 18, 2008

Gaps in health services are common, but Shelley Warner-Levison wonders whether her brother, Robert, might be alive today if the Canandaigua Veterans Affairs Medical Center did not close its unit for the most serious of psychiatric cases.

Robert Warner, a 45-year-old Army veteran with a history of mental illness, had done well during his stays in the unit, said Warner-Levison, but he couldn't get readmitted in early 2007 because it was shutting down.

"His life continued to tumble," said Warner-Levison, who used to travel from her home in St. Lawrence County to visit her brother when he was at the Canandaigua V.A.

Last November, after bouncing from one medical facility to another, Warner died at a hospital in Potsdam from what the autopsy report said was a serious infection caused by eating glass fragments.

Such gaps and barriers to services for veterans will be explored this month by three summits, called Voices Together, organized by the local Veterans Outreach Center. The first of these summits is Friday at the Crosswinds Wesleyan Church in Canandaigua.

The gatherings, organized as focus groups, are for veterans, those now serving in the military and their families, and the various groups and agencies that can help them.

"This is a chance to reach out to the men and women who are coming back and say, 'Look, we want you to take part in setting up services to help you,'" said Ellen Warren, the outreach center's vice president for development.

Voices Together dovetails with another effort launched by the Rochester Regional Coalition established earlier this year to help veterans, service members and their families.

Concerns about care

Warner-Levison won't be attending the upcoming summits, but the issue of closing gaps in services is a cause she has taken on to keep the memory of her brother alive. In Robert Warner's case, his medical reports describe him as suffering from schizophrenia, a disorder often characterized by withdrawal and delusions, and his mental illness might have been a factor in his recurrent episodes of nausea and vomiting.

He also was diagnosed with post-traumatic stress disorder, said his sister, and eventually he was classified by the V.A. as 100 percent disabled.

Dan Ryan, spokesman for the Canandaigua V.A., said that he can't comment on individual cases but that anyone who qualified for care will receive it.

But Warner-Levison contends that her brother fell through the cracks and that no one seemed to monitor his medical treatment once he left Canandaigua.

She had contacted Rep. John McHugh, R-Pierrepont Manor, Jefferson County, and urged that federal officials keep the psychiatric unit open. She also tried to enlist veterans groups in her cause and urges medical facilities to have open lines of communication.

The Canandaigua V.A., meanwhile, is trying to forge closer ties with community groups and veterans returning from service.

Serving a six-county area, the local V.A. celebrated its 75th anniversary this year. But five years ago, the center almost closed as federal officials looked for cost-savings. In the face of protests, federal veterans officials backed off.

Since then, a reorganization of the center was announced, calling for new buildings in the existing complex on the grounds of the center and collaboration with the University of Rochester to create a Center of Excellence that stresses suicide prevention. A national hotline for suicide prevention has been established at the V.A.

Canandaigua's V.A. has an annual budget of about \$79 million and about 775 employees. Last year, 17,606 patients received services, mostly as outpatients.

Currently about 1,100 of the estimated 2,500 Rochester-area veterans who have served in Iraq and Afghanistan since 2001 are getting health care here, said Kai Chitaphong who oversees the local V.A.'s outreach to these veterans. At the end of 2006, about half of 1,500 veterans from this area who had served there were getting health care here.

Veterans are classified into one of eight categories, the highest being service-connected disabilities and the lowest being no service-related care. The higher categories generally don't require a co-pay.

The income of the recipient can also be a factor in determining whether a co-pay kicks in or coverage is provided.

The number of veterans from all wars seeking some form of assistance from the local V.A. remains large.

Last year, the Monroe County Veterans Service Agency, which helps vets get services, took on 1,880 new cases, or 435 more than the in 2006.

Meanwhile, the Ontario County Veterans Service Agency, which provides a similar function for that county, was contacted by 1,120 vets last year.

Long-term needs

Helping a veteran, however, can require a long term commitment.

John Cushman, 36, who grew up in Palmyra, has no complaints about the medical care that has received from the Veterans Administration - at the Canandaigua hospital and elsewhere - from the severe wounds that he received from two roadside bombs in Iraq in 2004.

But Cushman is less certain about the road to recovery from emotional scars he has suffered.

"It's the mental stuff that haunts you, 24-7. The littlest thing can set you off," said Cushman, who is now living in Rocky Ford, Colo.

The fact that so many of the troops serving in Iraq and Afghanistan are reservists and members of the National Guard called up for duty makes their deployments especially disruptive to families, especially when they are called up again after returning home.

Deborah Edlen, 38, of Mount Morris, Livingston County, has twice had to endure separations from her husband, Jason, who is in the 401st Civil Affairs Battalion.

During her husband's deployment to Afghanistan from November 2003 to October 2004, Edlen had to go from her full time job as a nurse at Strong Memorial Hospital to part-time work because she had four children to raise on her own.

"It was very difficult. I don't think I got the support needed," Edlen said